Helping patients change: Can we become the butterfly?

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Becoming the butterfly

- 1. Nonlinear change ("Butterfly Effect")
- 2. Outcomes of lifestyle counseling studies
- 3. Tips for behavior change counseling

The "Butterfly Effect"

Nonline ar change



Why did the control group get better?

Butterfly Effect...

Nonlinear systems in nature

Some natural changes are nonlinear:

Smoke coming off a cigarette
Fluids flowing through a pipe
A psychotic break
Water at its freezing point
Tipping into A-fib?
Reconverting to sinus rhythm?
A smoker quitting or relapsing...

His Last Day of Smoking (David Premack, 1970)

A man went to pick up his children at the city library. A thunderstorm greeted him as he arrived there, and as he waited, engine running, a search of his pockets disclosed a familiar problem: he was out of cigarettes. He pulled away from the curb to quickly buy a pack at the corner store...

What caused this smoker to quit for good that

"Glancing back at the library, he caught a glimpse of his children stepping out in the rain, yet he continued around the corner, certain that he could find a parking space, rush in, buy the cigarettes, and be back before the children got seriously wet. He paid for the cigarettes, left them on the counter and never smoked again."

Nonlinear change

Change that is abrupt, unexpected, hard to predict

A small change in a driver leads to a very large change in outcome

The tipping point: once a certain threshold is crossed, the system explodes into chaos:

Maybe this describes the kinds of change we deal with?

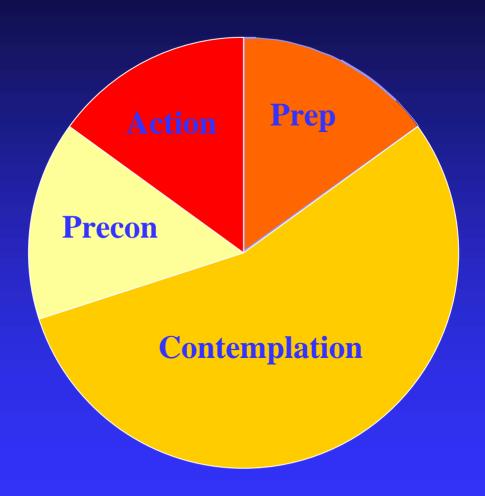
Nonlinear change

Some sudden changes are merely the result of how nature has previously stacked the cards

The small intervention is merely a catalyst

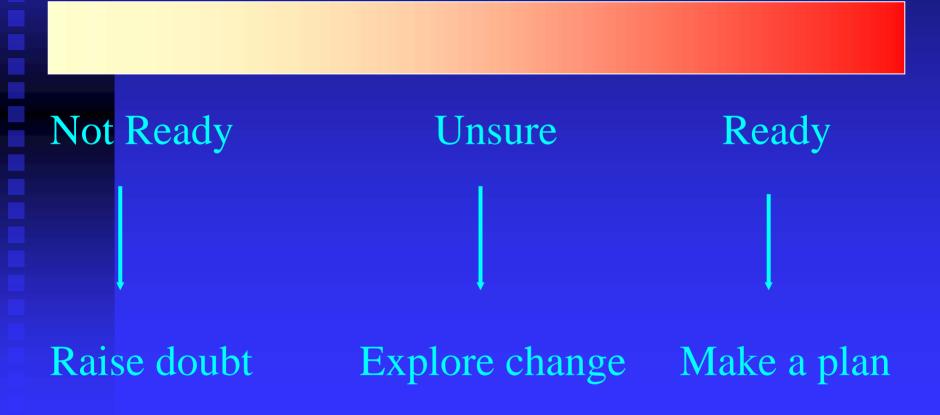
The bullwhip phenomenon

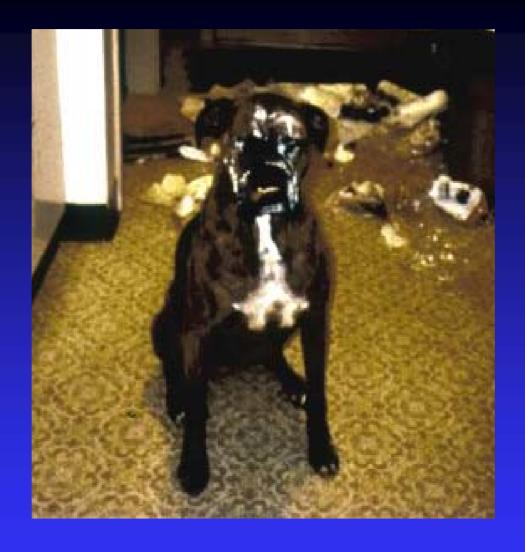
Ready for immediate change?



But most are *considering* change...

Stages of Readiness:





Problem behavior: Raiding the garbage

The Boxer Readiness Ruler



Not Ready

On the Fence

Ready

Motivational Interviewing (MI)

- Evidence-based method to prepare for change
- Starts with "why" change before "how"
- Effective with less ready patients

More than just brief advice...

MI has been adapted for medical settings

- Quick
- Works for multiple behaviors
- Works with multiple ethnicities
- Targets self-management in Chronic Care Model

Outcomes of lifestyle counseling studies

- •Smoking
- •HTN
- Exercise

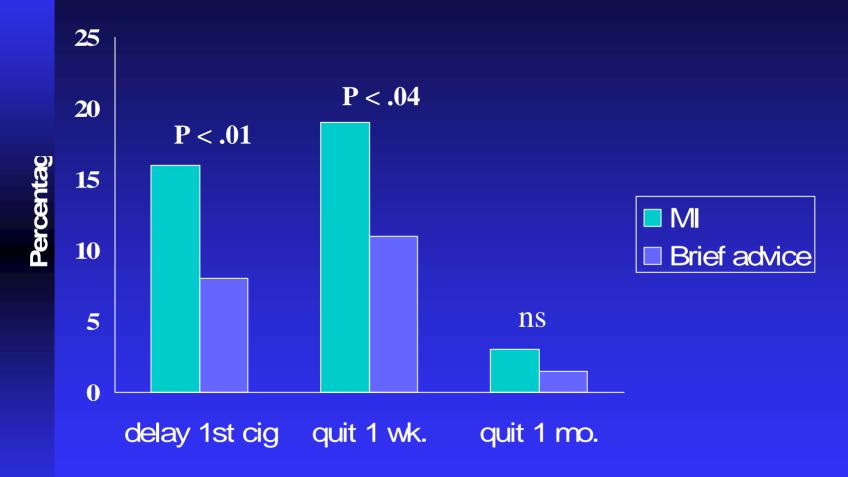
MI for Smoking

- 536 smokers in PC setting, UK
- MDs provided 10 min MI vs. 2 min advice
- MI training = 2 hr.

6-mo. outcomes:

- % delaying 1st cig of the day
- \blacksquare % quit ≥ 1 week in the past 6 mos.
- % abstinent during the past month

6- month Smoking outcomes



*Greatest advantage for MI among less ready patients

MI for Smoking

Design Randomized clinical trial

Population Hospital emergency room

Nation US (Providence, RI)

N 40 adolescent smokers

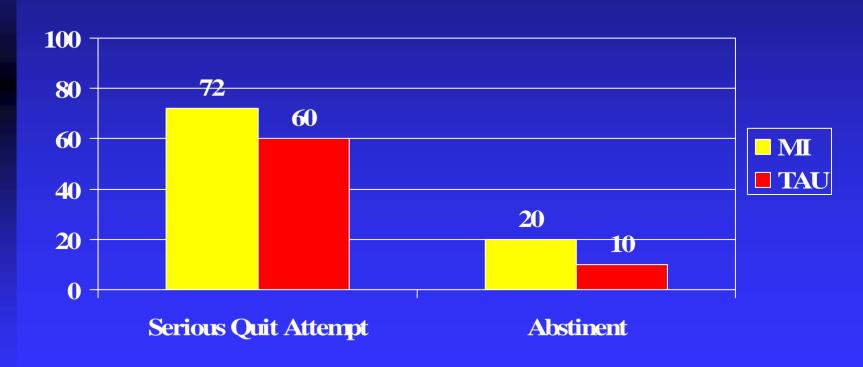
■ MI 1 MET session with 4 videos

Comparison Brief advice

■ Follow-up 3 months

MI for Smoking

Percentage of Cases at 3 Months



Colby et al., 1998

ns; ES = .28

MI for Hypertension

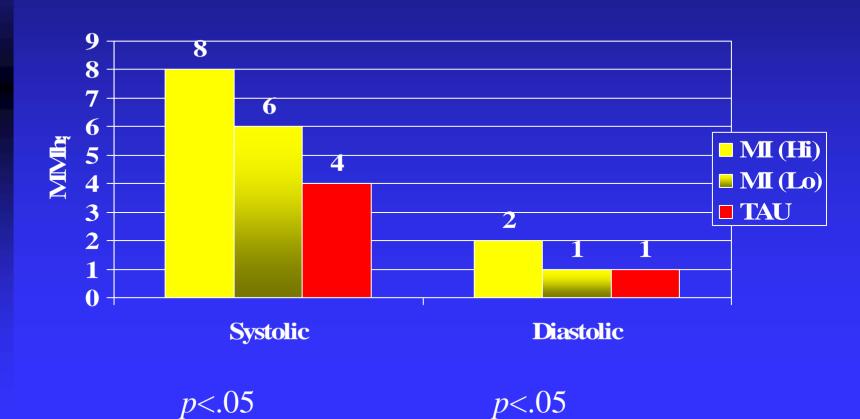
- 566 primary care hypertensives
- MDs provided MI: 1 session
- RN counselors
- Lo MI (1 in person & 5 tele) vs. Hi MI (6 and 5) vs. CG

4-month outcomes:

- BP
- **ETOH**
- Na consumption
- Weight loss

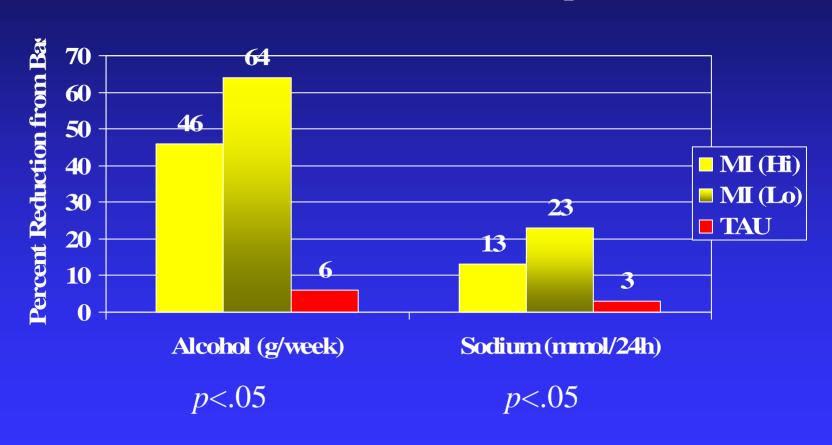
MI for Hypertension

Decreases in Blood Pressure



MI for Hypertension

Percent Reduction in Consumption



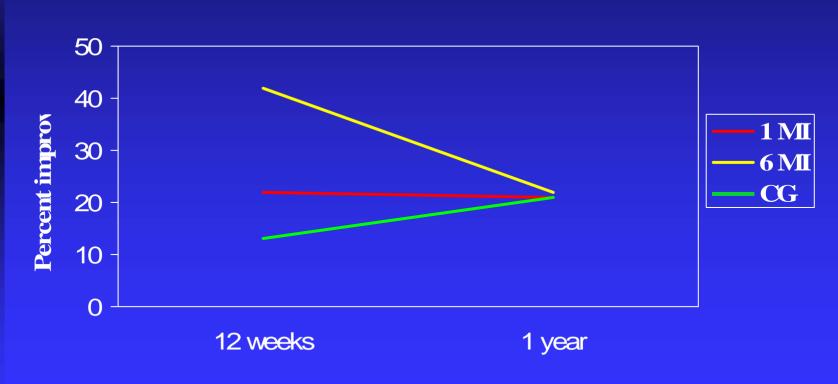
MI for Exercise

- 523 adults in PC setting in the UK
- Health counselors provided MI (1 session or 6 sessions)

■ 12-wk and 1-yr. Outcomes: % with improved physical activity scores

MI for Exercise

% with improved physical activity scores



Harland, 1999. BMJ v.319: p.828

Tips for behavior change counseling

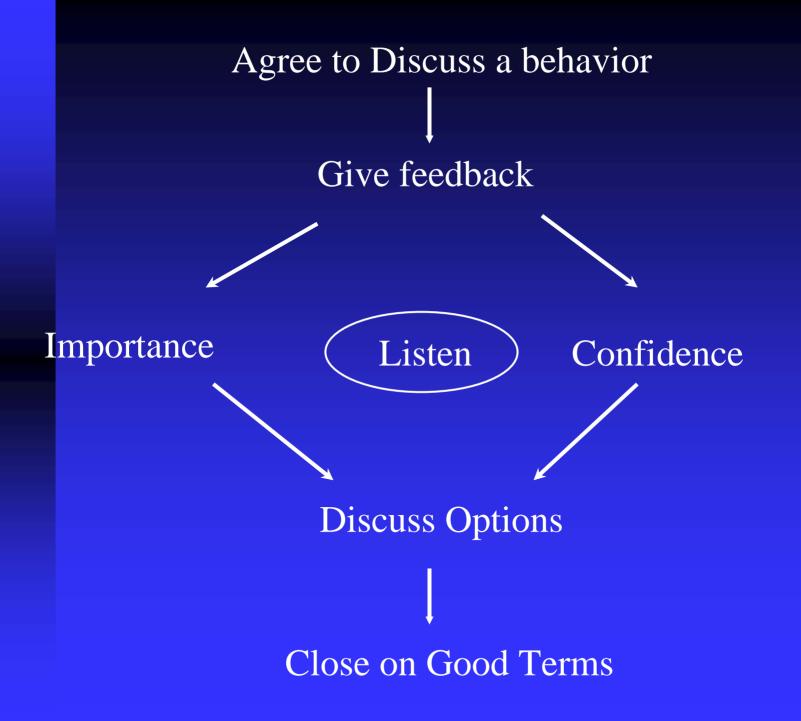
F L O

Three critical tasks.... "FLO"

Give Feedback to patient

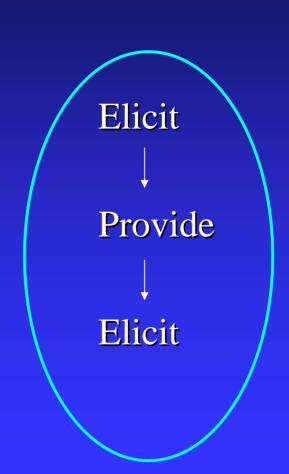
Listen and understand

Discuss Options



Two different styles





Agree to discuss a behavior

Link your topic to your patient's chief concern (or)

•Use the "dinner plate" to find out where the action is....

Avoid "bouncing"



Agree to discuss a behavior



Agree to discuss a behavior

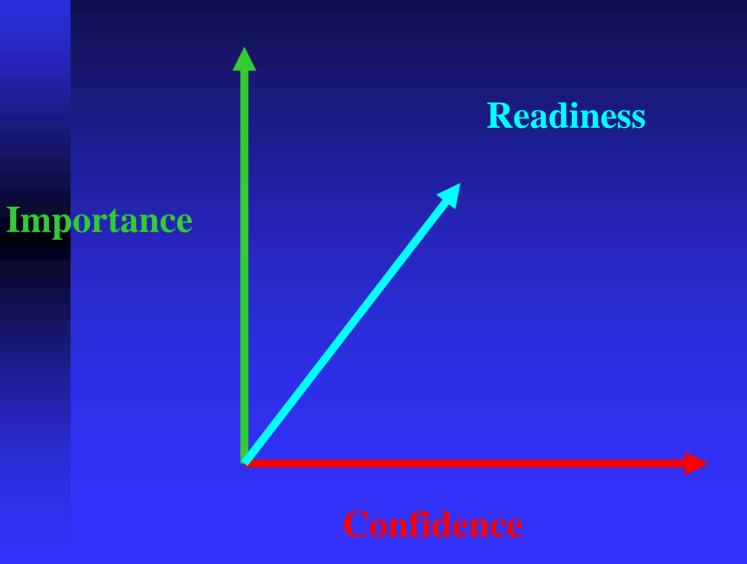
Ways to Manage Your Cholesterol

- These topics are very important to your health
- No patients do these perfectly
- It's best to work on one at a time
- You won't be pushed into changing
- Which one do you want to discuss?

Adapted from Sion, Rollnick, & Pill (1995). Family Practice 12(4):413: By permission of Oxford University Press and authors.



Importance, Confidence and...Readiness



Give Feedback to patient

I'm not here to persuade you to change.

I'd like to go over some lab results with you...

You may decide to change or not after we talk; it's really up to you to decide...

Give Feedback to patient

Range: "Blood pressure can range from _____ to ____"

Ask: "Does that make sense to you?"

Normal blood pressure is _____"

Give score: "Your level was ..."

Elicit reaction: "What do you make of that?"

Listen and understand

It's your sharpest tool...

Listen and understand

- On a scale of 0-10, how *important* is it to you to (change)?
- Why did you give it (#) and not (lower number)?
- What would it take to give it a (higher number)?

1	m	p	0	r	1	t	a	n	C	е
0	1	2	3	4	5	6	7	8	9	10

Listen and understand

- On a scale of 0-10, how *confident* are you that you can change successfully?
- Why did you give it (patient's number) and not (lower number)?
- What would it take to give it a (higher number)?



Discuss Options

- 1. Clarify goals first (theirs, not yours)
- 2. Then use *Elicit-Provide-Elicit* format:

- Elicit: What are your ideas about how to do this?
- Provide: *May I offer you my ideas?*
- Elicit: Is this something you feel ready to commit to?

Discuss Options

Date: Patient Name:————



- •My goal is to:
- •The steps I plan to take are:
- •Challenges that may interfere:
- •How I will handle these challenge
- •I'll know my plan is working if:



Mental rehearsal improves follow-through

- WHO will be involved besides you?
- WHAT event will trigger the action?
- WHEN will this action take place?
- WHERE will this action take place?

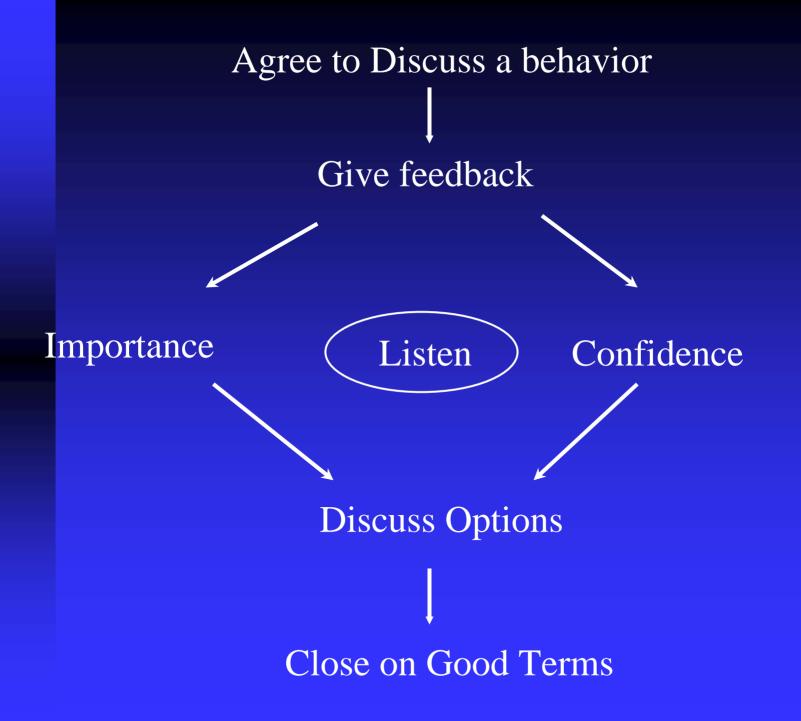
...put the new action on automatic pilot

Close on good terms

S: Summarize patient's views on importance and confidence.

E: Earnestly praise patient's hard work.

W: What agreement was reached is repeated.



Written resources on behavioral counseling

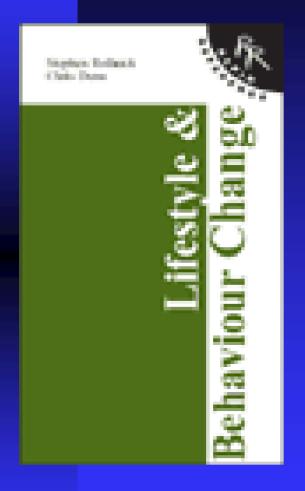
Books:

Dunn CW, Rollnick S. (2003). Rapid Reference guide to Lifestyle and Behavior Change. London, Elsevier.

Rollnick S, Mason P, Butler C (1999). *Health Behavior Change: A guide for practitioners*. Edinburgh, Livingstone.

Miller WR, Rollnick S. (2002). *Motivational Interviewing*. *Preparing People for Change*. Second Edition. New York, Guilford Press.

Rapid Reference to Lifestyle Change



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http://www.us.elsevierhealth.com

Internet resources: Training videotape and workshops

Behavior change counseling training videotape based on *Health Behavior Change* (book by Rollnick, Mason & Butler, 1999): jeffallison.co.uk/index.htm

The Motivational interviewing page: Training resources, reprints and videotapes: motivationalinterview.org

The Centre for Motivation & Change: Training & consulting in chronic disease management, addictions, lifestyle change & health promotion, medication compliance: http://www.tomaatnet.nl/%7Erikbes/cmc.htm